

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts File with: City or Town Clerk or Election Comm	nissior
Fill in Reporting Period dates: Beginning Date: 10t. 22, 2011 Ending Date: 10v. 29, 2011	
Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution	1
Candidate Full Name (if applicable) Candidate Full Name (if applicable) Committee to Fleet Dawl Muscher Committee Name Committee Name Vigura M. Muscher Name of Committee Treasurer 12 Fremar Lue Chella Ma 02/5 Committee Mailing Address Telephone Number (optional): Telephone Number (optional):	
SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	
Line 2: Total receipts this period (page 3, line 11) Line 3: Subtotal (line 1 plus line 2) 5020-44	
Line 4: Total expenditures this period (page 5, line 14)	
Line 5: Ending Balance (line 3 minus line 4) Solution 5: Ending Balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 6)	
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used: TO Bank Chelsea Ma. 02150	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury: The penalties of	,
Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign fin activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contribution incurred any liabilities nor made any expenditures on my behalf during this reporting period.	nance
Candidate without Committee OR Candidate with independent activity filing separate report I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.	
Signed under the penalties of perjury: Cull (Candidate's signature) Date: 1/29-11	

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to

report all receipts. Please include your committee name and a page number on each page.)

report all receipts. Please include your committee name and a page number on each page.)						
	Name and Residential Address		Occupation & Employer			
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)			
11-15-11	Jilipo D'Amato #1 834 Princitai Street 8. Bostei Ma Ostas	\$500.00	Construction			
11-15-11	James W. Harsburg 100 Batswin Way Upt. 204 Chelsea Ma 02150	# 100.00				
11-15-11	Mr. Guseph T. Riddington 14 North Ridge Circle Depris Ma. 01904	#200°00	Busseressman			
- 5-	Edward Welsh 27 Silver Road Evertt Ma 02149	\$100.00				
11-30-11	Mys. Virginia Murphy 12 nemart line Chelsea Ma 02150	#100.00				
·						
Line 9: Total Recei	pts over \$50 (or listed above)	\$1000.00				
Line 10: Total Rece	ipts \$50 and under* (not listed above)	#575.00	· ·			
	ECEIPTS IN THE PERIOD	# 1575 .03	← Enter on page 1, line 2 d include only those receipts not itemized above.			

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required) Amount		Occupation & Employer (for contributions of \$200 or more)	
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Line 9: Total Receip	ots over \$50 (or listed above)			
ine 10: Total Recei	pts \$50 and under* (not listed above)			
	ECEIPTS IN THE PERIOD	ł	Enter on page 1, line 2 d include only those receipts not itemized above.	

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

report all expenditures. Please include your committee name and a page number on each page.)					
Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
11-8-11	Cerry Grave lissoc.	Washingten Due Chelsea Ma 02150	Campaign Reception	\$109.00	
11-10-11	Chelsea Recard	385 Bloadway Revere Ma	Campaign lide	\$ 228.00	
11-22-11	Chelsea Recard	385 Broadway Rever Ma	Campaign lide	\$ 364.00	
11-29-11	Erin Murphy	8 Fremont lue Chelsia Mar 02150.	Campaign Expenses	# 277.43	
11-29-11	Keven Mushy Sr.	12 Frement live Chelsea Ma 02/50	Campaign Expenses	\$446°-31	
10.24.11	S-L Cold cuts		fundiaiser Reception	\$ 385.00	
11-8-11	S.L Coldoute		Campaign, Reception	# 195.00	
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	Line 12: Total Expenditures over \$50 (or listed above)				
		Line 13: Total Expenditures \$50	and under* (not listed above)	Ø	
		Line 14: TOTAL EXPENDITU			

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE B: EXPENDITURES (continued)

To Whom Paid					
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
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William Transmit					
		Line 12: Expenditures over \$50	(or listed above)	,	
		Line 12. Evnanditures \$50 and :	under* (not listed above)		
Line 13: Expenditures \$50 and under* (not listed above)					
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD					

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		-		
		Line 15: In-Kind Contributions	over \$50 (or listed above)	
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS				\emptyset

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
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A CONTRACTOR OF THE CONTRACTOR				
# 1700ALL L. ABBERT				
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THE PROPERTY OF THE PROPERTY O				THE STATE OF THE S
	Putan 1 11 - 7 >	Line 18: TOTAL OUTSTANI	ING LIARIT TTIES (ALL)	T (A

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